

AUG 29 2005

FAX TRANSMISSION**DATE:** August 29, 2005**PTO IDENTIFIER:** Application Number 10/776,367
Patent Number**Inventor:** Oren Rosenfeld**MESSAGE TO:** US Patent and Trademark Office - Examiner Kumiko C. Koyama**FAX NUMBER:** (703) 872-9306**FROM:** DARBY & DARBY P.C.

S. Peter Ludwig

PHONE: (212) 527-7770**Attorney Dkt. #:** 06727/100H935-US1**PAGES (Including Cover Sheet):** 3**CONTENTS:** Authorization to Act in Representative Capacity
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (212) 527-7770 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

DARBY & DARBY P.C.
P.O. Box 5257, New York, New York 10150-5257
Telephone: (212) 527-7700 Facsimile: (212) 527-7701

PTO/SB/87 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

U. S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/776,367

Attorney Docket No.: 06727/100H935-US1

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on August 29, 2005
Date



Signature

Lora Choi Abanador

Typed or printed name of person signing Certificate

Registration Number, if applicable

212.527.7700 ext. 2943

Telephone Number


Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Authorization to Act in Representative Capacity (1 page)

RECEIVED
CENTRAL FAX CENTER

AUG 29 2005

Based on USPTO Sample Form (08-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY					
In re Application of: Oren Rosenfeld					
Application No. 10/776,367					
Filed: February 10, 2004					
Title: ELECTRONIC SHELF LABEL SYSTEMS AND METHODS					
Attorney Docket No. 06727/100H935-US1	Art Unit: 2876				
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 50%; text-align: center; padding: 5px;">Name</th> <th style="width: 50%; text-align: center; padding: 5px;">Registration Number</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Sanford T. Colb, Esq. Sanford T. Colb & Co. 4 Shaar Hagai P.O. Box 2273 Rehovot 76122 ISRAEL</td> <td style="text-align: center; padding: 5px;">26,856</td> </tr> </tbody> </table> <p style="margin-top: 20px;">This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>		Name	Registration Number	Sanford T. Colb, Esq. Sanford T. Colb & Co. 4 Shaar Hagai P.O. Box 2273 Rehovot 76122 ISRAEL	26,856
Name	Registration Number				
Sanford T. Colb, Esq. Sanford T. Colb & Co. 4 Shaar Hagai P.O. Box 2273 Rehovot 76122 ISRAEL	26,856				
SIGNATURE of Practitioner of Record					
Signature					
Date	August 29, 2005				
Name	S. Peter Ludwig				
Registration No., if applicable	25,351				
Telephone	(212) 527-7770				

Express Mail Label No. _____	Dated _____
------------------------------	-------------